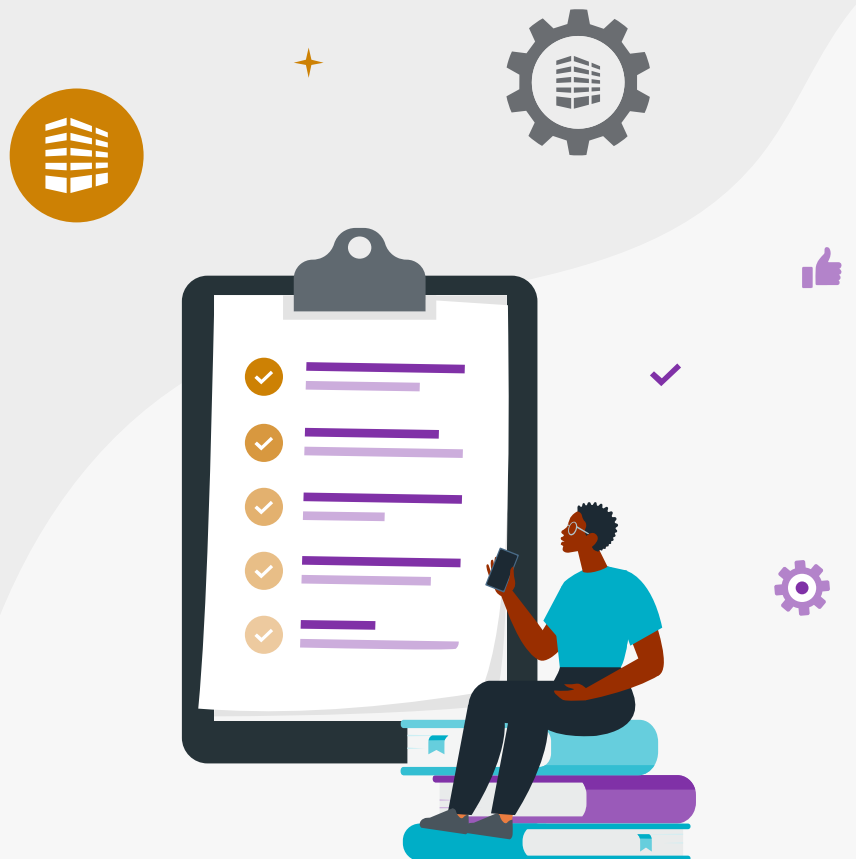


# Membership Guide

## *Bronze*





## Purpose of this document

Buyers choose Facilitiesline to ensure their supply chain is full of committed and trustworthy suppliers. They rely on us to help suppliers meet the highest quality, safety, and compliance standards.

This document is provided to give you guidance, a smoother verification journey, and support you to achieve the best out of your membership. Follow this document to help you get Verified and ensure you meet the commitments our buyers are looking for.



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# An Introduction to Compliance

The 'Compliance' app is the home of your company's compliance information. Within the app, you will complete and keep sections up-to-date to ensure you maintain a Verified profile.

## 1

### What is the Overview App?

If you are looking to see if anything is outstanding on your account, the '**Overview**' app is the place to go. Here we collate all expired, missing, or rejected information to advise you that it needs your attention.

Here, '**Action Required**' and '**Compliance by Certification Level**' will notify you if there are any areas of your account that require an update. You can access your '**Certificates**' if you are verified here too.

## 2

### What is the Requirements App?

The '**Requirements**' app is where you will input all your company information and complete the required question sets. In here, you will find the requirements broken down into the Total, Action Required, Submitted for Assessment and Completed.

When you select '**Resolve**' from any of the '**Action Required**' or '**Compliance by Certification Level**' items, the Requirements app will appear in a focussed view, only showing items from the specific Level.

## 3

### What is the Buyer Connections App?

The '**Buyer Connections**' app is the home of your Buyer Connections. This is where suppliers that join Facilitiesline at the request of a Buyer or have opted for a Dynamic Purchasing System (DPS) will find their requirements.

If a Buyer Connection requires a specific membership level that you currently do not have, an upgrade request will appear here.

## 4

### What is the Work Categories App?

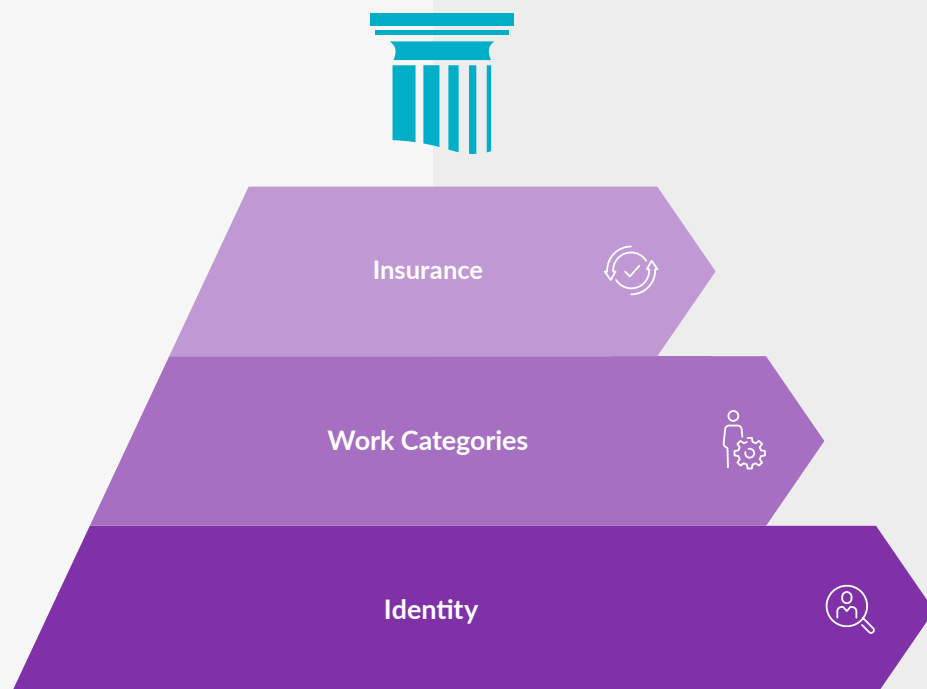
Your businesses will provide various services that buyers within the system will seek to source as part of their projects. '**Work Categories**' allows you to provide details of all the services your businesses offer, helping you appear in more searches and receive more expressions of interest.

*Please note: All companies must have at least one work category, and some work categories may require a licence or specific insurance, such as a Gas Safe Register certificate.*



## Gaining and Maintaining a Verified Status

Maximise the benefits of your membership by familiarising yourself with our platform. Understand the documents required and provide our verification team with accurate information. **This guide offers valuable tips and advice to help you navigate the verification process successfully and make the most of your Facilitiesline membership.**



### Path to a Verified profile

Some of our requirements have dependency questions from other requirements.

How you complete and submit your verification could impact the time taken to achieve your Verified status. For example, within the 'Registered Office' question set, we need to know if you are registered with Companies House. For us to know this, the 'Company and Financial Information' requirement within 'Identity' must also be completed.

You can complete questions as you go rather than all at once. If so, using the pyramid (to the left) will guide you on the best route to ensure a straightforward path to a Verified profile.

### How do I get started?

Once you are ready to begin providing your answers, you must follow the following steps:

- ✓ Navigate to 'Compliance', select 'Overview' and 'Resolve' by Facilitiesline Bronze in the 'Compliance by Certification Level' section
- ✓ Proceed to work your way through the requirements on your profile

Refer to this document or the 'Guidance' buttons for support. Our support team can also help via 'Live Chat', or on 0333 300 3066.

- ✓ **Submit:** As soon as you have completed a section you are working on, click the **'Submit'** button at the bottom of the screen. Most sections will also automatically save so that you can return to complete it at a later date, or you will see the **'Save'** button instead.

## What to remember

**There are a few consistent checks our team make when reviewing your submissions. To ensure we verify your submission first time with no rejections, it is important to remember the following:**

- ✓ All documents provided must clearly display the company name or logo.
- ✓ Most policies will require a date and signature from an appropriate director within the last 12 months.
- ✓ All certificates are required to display the full company name on the certificate or a scope letter.
- ✓ Policies and procedures can be accepted in a related company's name if the related company is listed within the relevant requirement in Identity (Related Companies).

*Please note, this excludes certificates.*



**In for Submission:** Your requirement is now submitted and in our verification queue, ready for assessment. Please note: It can take up to **10 working days** for a submission assessment to be completed.



**Missing Answers:** This status displays when you have started a question set but still need to complete it. Head to the **'Requirements'** app to see which sections require your attention.



**Verified:** When you see this status, that requirement is now Verified and no longer needs your attention. Once all areas of the question set displays this status, you are fully Verified and can download your certificate.

## How do I stay Verified?

Once your requirements are Verified, they will have individual expiry dates. These can be found against each requirement within the **'Requirements'** app. For those that may have licences within the requirement, these will expire at the same time as the certificate. For those that do not have a licence, the expiry will be a year from the date of verification.

A reminder will be sent to you via email, and the requirement will also appear in the **'Action Required'** tab 30 days prior to expiry, to notify you.

We offer a **'Concierge'** service, that gives you a dedicated advisor that will contact you when something is due to expire. They will help you understand all required documentation and assist with any other questions.



Find out more about Concierge: <https://facilitiesline.co.uk/suppliers-services/membership-bolt-ons/>



## Bronze Supplier Questions

Our Bronze membership is specifically tailored to meet Facilities Management requirements for smaller organisations. We assess detailed information regarding each company, including financial and insurance credentials.



**Upgrade your membership to Gold at any time by visiting 'Manage Account' within your profile, and you will be discounted the remaining balance from your previous membership onto your new membership.**

### Advisory Questions

Most questions are mandatory and failure to successfully complete them will result in a company not obtaining Bronze. There are several questions which have been designated as 'advisory' questions and these are identified within the fourth column of this guide.

A company does not have to complete advisory questions to achieve Bronze, but any question which is not successfully completed will be flagged with advisory feedback when the company's verified data is shared with Buyers.

## Identity

To obtain Facilitiesline Bronze, the first step is to verify your company's identity. This requires the submission of detailed information regarding your company and the scope of work performed.

The information extracted from company accounts will include details such as share capital, reserves, current assets, current liabilities, long-term debt, turnover, and profit before tax.

Your turnover figure is used to assess your annual subscription fee and is also a component part of the notation calculation. All companies registered with Facilitiesline must undergo financial credibility checks.

You must ensure that you provide your full and final accounts and not the abbreviated version typically filed at Companies House. A small company or limited liability partnership with a turnover below the audit threshold at which the preparation of audited accounts is not required may provide their unaudited full and final accounts.

**A company may qualify for an audit exemption if it has at least two of the following:**

**For accounting periods that begin on or after 6 April 2025**

- ✓ An annual turnover of no more than £15 million
- ✓ Assets worth no more than £7.5 million
- ✓ 50 or fewer employees on average

**For accounting periods that began before 6 April 2025**

- ✓ An annual turnover of no more than £10.2 million
- ✓ Assets worth no more than £5.1 million
- ✓ 50 or fewer employees on average

**Full accounts should include:**

- ✓ Directors' report
- ✓ Profit and loss account
- ✓ Balance sheet
- ✓ Accountant's certificate
- ✓ Any relevant notes accompanying the accounts

We acknowledge the importance of confidentiality in financial matters and assure you that only essential information required for the assessment will be disclosed.

The information provided will undergo verification, based on the company type. For instance, information provided by Limited Companies will be validated against their Companies House profile to ensure compliance with legal requirements for operating within the UK.

**Various key topics within this module include:**

- ✓ Company and Financial Information: Includes company name, trading name, establishment and incorporation date, any relevant registration numbers and financial information
- ✓ Company Structure: Details on Directors, Partners, and Secretaries within the organisation
- ✓ Company Size: Categorised as Micro, Small, Medium, or Large
- ✓ Offices and Contacts: Your registered or head office, areas of operation and contact information

# Identity

## PRIMARY CONTACT

Ref	Question	Guidance	Info	
291 - 298	<div><div>- Title (Mr, Mrs, Ms, etc.)</div><div>- Forename</div><div>- Family Name</div><div>- Job Title</div></div>	<div><div>- Telephone Number</div><div>- Mobile</div><div>- Fax Number</div><div>- Email</div></div>	<div><div>✓ Details of the person accountable for the membership must be entered</div><div>✓ This is the person that will be contacted by our team <i>(Please note, all system emails will be sent to the Primary Contact)</i></div></div>	N/A

## ENQUIRY CONTACT

Ref	Question	Guidance	Info
309	Is the primary contact also the contact for business and/or pre-qualification enquiries?	✓ Please answer Yes or No	N/A
310 - 317	<b>Enquiry Contact</b> - Title (Mr, Mrs, Ms, etc.)    - Telephone Number - Forename                        - Mobile - Family Name                   - Fax Number - Job Title                         - Email	✓ Details of the person to contact for enquiries	N/A
3628	Do you have an additional contact for New Business?	✓ Please answer Yes or No	N/A
3628 - 3634	<b>New Business</b> - Title (Mr, Mrs, Ms, etc.)    - Telephone Number - Forename                        - Mobile - Family Name                   - Fax Number - Job Title                         - Email	✓ Details of the person to contact for new business	N/A
3636	Is the Supply Chain Manager the same as the Enquiry Contact?	✓ Please answer Yes or No	N/A
3637 - 3643	<b>Supply Chain</b> - Title (Mr, Mrs, Ms, etc.)    - Telephone Number - Forename                        - Mobile - Family Name                   - Fax Number - Job Title                         - Email	✓ Details of the Supply Chain Manager	N/A

## HEAD OFFICE

Ref	Question	Guidance	Info
318 - 329	<div><div>- Office name</div><div>- Address line 1 (Property name/ number)</div><div>- Address line 2 - 4</div><div>- Town</div></div>	<div><div>- County</div><div>- Postcode</div><div>- Country</div><div>- Telephone number</div><div>- Fax number</div><div>- Website</div></div>	<div>✓ Provide the address of your Head Office</div> <div>N/A</div>

## REGISTERED OFFICE

Ref	Question		Guidance	Info
299	Do you have separate Head Office from your Registered Office?		✓ Please answer Yes or No	N/A
300 -308	- Head Office name - Address line 1 - 4 - Town - County	- Postcode - Country - Telephone number	✓ Provide the address of your Head Office if different from your Registered Office	N/A

# Identity

## AREAS OF OPERATION

Ref	Question	Guidance	Info
333	Please provide details of your areas of operation	<ul style="list-style-type: none"> <li>✓ Please provide the geographic areas where your company operates</li> <li>✓ The minimum contract value should include travel costs</li> </ul>	N/A

## COMPANY AND FINANCIAL INFORMATION

Ref	Question	Guidance	Info
10399 / 347 / 343	Have you registered with Companies House?	<ul style="list-style-type: none"> <li>✓ If Applicable, provide the registration number and incorporation date</li> <li>✓ If you are based outside the UK and registered with Companies House, please ensure that your registration number includes the prefix <b>FC</b></li> <li>✓ If you are a sole trader or not registered on Companies House, please answer <b>N/A</b></li> </ul>	N/A
350 / 351	Have you registered as a charity?	✓ If Applicable, provide the registration number	N/A
348 / 349	Have you registered with an equivalent body?	✓ If Applicable, provide the registration number	N/A
337	Please select your Supplier Type	✓ Select if you are a Contractor, Consultant or Material Supplier	N/A
2308	Please provide your Legal Entity Name	✓ Provide the legal entity, partnership or sole trader name	N/A
339	Please provide your Trade Name	✓ Provide your company trading name	N/A
9800	Please select your Organisation Type	<ul style="list-style-type: none"> <li>✓ Select if your company is a:               <ul style="list-style-type: none"> <li>- Limited Liability Partnership</li> <li>- Partnership</li> <li>- Private Limited Company</li> <li>- Public Limited Company</li> <li>- Sole Trader</li> <li>- Third Sector</li> <li>- Other</li> </ul> </li> </ul>	N/A
341	Please enter the date your organisation was set up	✓ This cannot be after date of Incorporation if Applicable	N/A
344 / 345	Do you have a Unique Tax Reference?	If Applicable, provide the reference number	N/A
352 / 353	Have you registered for VAT?	If Applicable, provide the registration number	N/A
3369	Please select your Organisation Size	<p>You must meet at least 2 of the following conditions in any organisation size to be classified as such</p> <p><b>Micro:</b></p> <ul style="list-style-type: none"> <li>✓ No more than 10 Employees</li> <li>✓ Turnover no more than £1m</li> <li>✓ Balance sheet total no more than £500,000</li> </ul> <p><b>Small:</b></p> <ul style="list-style-type: none"> <li>✓ No more than 50 Employees</li> <li>✓ Turnover no more than £15m</li> <li>✓ Balance sheet total no more than £7.5m</li> </ul> <p><b>Medium:</b></p> <ul style="list-style-type: none"> <li>✓ No more than 250 Employees</li> <li>✓ Turnover no more than £54m</li> <li>✓ Balance sheet total no more than £27m</li> </ul> <p><b>Large:</b></p> <ul style="list-style-type: none"> <li>✓ More than 250 Employees or</li> <li>✓ Turnover more than £54m</li> </ul>	N/A

# Identity

## COMPANY AND FINANCIAL INFORMATION

Ref	Question	Guidance	Info
2310	Do you operate as a sheltered workshop, social enterprise or social business or will you provide for the performance of the contract in the context of sheltered employment programmes?	✓ Please answer Yes or No	N/A
2311	Please select the type of Organisation you operate as	✓ Select either: - Sheltered workshop - Social Enterprise	Exemption if answered No to REF: 358
358	Please enter the percentage of disabled or disadvantaged workers in your workforce	✓ Please provide the percentage of disabled or disadvantaged workers	Exemption if answered No to REF: 358
2314	Please specify which of the following categories they belong to.	✓ Specify which of the following categories they belong to: - Has experience of homelessness - Has long-term physical, mental, intellectual or sensory impairment(s) which, in interaction with various barriers, may hinder their full and effective participation in a work environment on an equal basis with other workers - Has not attained an upper secondary educational or vocational qualification (International Standard Classification of Education 3) or is within two years of completing full-time education and who has not previously obtained his or her first regular paid employment - Has not been in regular paid employment for the previous 6 months - Is a Care-leaver - Is a member of an ethnic minority within a Member State and who requires development of his or her linguistic, vocational training or work experience profile to enhance prospects of gaining access to stable employment - Is a recovering addict - Is a single parent - Is a veteran - Is an ex-offender - Is between 15 and 24 of age - Is over the age of 50 years recognised as worker with disabilities under national law - Lives as a single adult with one or more dependants - Works in a sector or profession in a Member State where the gender imbalance is at least 25% higher than the average gender imbalance across all economic sectors in that Member State, and belongs to that under-represented gender group - Other	Exemption if answered No to REF: 358
9947	Do you employ sub-contractors?	✓ Please answer Yes or No	N/A
9801	Please enter the percentage of your directly employed workforce that is in 'earn and learn' positions	✓ If Applicable, provide the percentage	Supplier will receive an advisory pass if answer does not meet standard
330	Please add the details of the following individuals associated with your organisation: - Proprietors - Partners - Directors - Company Secretary	✓ Provide their names and roles ✓ All active officers listed on Companies House must be listed here	N/A

# Identity

## COMPANY AND FINANCIAL INFORMATION

Ref	Question	Guidance	Info
3603	Please enter the total number of your direct employees (PAYE)	<ul style="list-style-type: none"> <li>✓ Direct employment is an employment status for tax and employment law purposes which generally involves the following: <ul style="list-style-type: none"> <li>- A contract of employment</li> <li>- Full statutory rights as an 'employee'</li> <li>- Payment to HMRC of PAYE income tax and employer and employee Class 1 NICs</li> </ul> </li> </ul>	N/A
3604	Please enter the total number of your indirect personnel (non-PAYE)	<ul style="list-style-type: none"> <li>✓ Indirect personnel includes individuals working as or via labour-only subcontractors, or engaged via other intermediaries, including employment businesses, umbrella companies, personal service companies etc.</li> <li>✓ It does not include individuals who work as or for a bona-fide trade contractor (i.e. a company that contracts to perform a defined subcontract work package for which it carries commercial risk)</li> </ul>	N/A
2307	Please enter the total number of your workforce	<ul style="list-style-type: none"> <li>✓ Provide the total figure (PAYE and non-PAYE)</li> </ul>	N/A
335	Do you hold any Trade Association or professional body memberships?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> </ul>	Supplier will receive an advisory pass if answer does not meet standard
336	Please add the details of your Trade Association or Professional Body Memberships - Name of Trade Association or Professional Body - Membership Number - Website of Trade Association or Professional Body	<ul style="list-style-type: none"> <li>✓ Please upload your membership certificate or evidence of membership</li> </ul>	Exemption if answered No to REF: 335
1971	Please provide details of your latest financial accounts Please enter the year for the Financial accounts information you are providing Please enter your last accounts date as stated on your annual accounts Please enter the period, in months, for which your Financial accounts cover Please upload your financial accounts evidence	<ul style="list-style-type: none"> <li>✓ Limited Companies <ul style="list-style-type: none"> <li>- The company's latest full and final accounts must be uploaded here (Last accounts filed with Companies House).</li> <li>- These should consist of Profit and Loss Page, Balance Sheet, and Notes to the Financial Statement</li> </ul> </li> <li>✓ New Companies Limited/LLP <ul style="list-style-type: none"> <li>- If you are a new Start Up Limited Company, you are required to provide an Opening Balance Sheet as at the date of incorporation</li> <li>- You must also provide either a 12-month cash flow forecast, or a 12-month forecast profit and loss account from the date of incorporation</li> </ul> </li> <li>✓ Sole trader <ul style="list-style-type: none"> <li>- If you are a new Start Up Sole Trader, you are required to provide a profit and loss account or a self-assessment tax return</li> <li>- This must display your details, the turnover and net profit</li> <li>- We are also able to accept your Balance Sheet, if available</li> </ul> </li> </ul> Partnership <ul style="list-style-type: none"> <li>- If you are a new Start Up Partnership, you are required to provide your full accounts or partnership tax return (profit and loss account, balance sheet and reconciled capital accounts are required) to support the data you have entered</li> </ul>	N/A

# Identity

## COMPANY AND FINANCIAL INFORMATION

Ref	Question	Guidance	Info
29 - 31 10392 - 10393	Has your organisation, or any of its Directors or Executive Officers, ever had any criminal or civil judgments against them in relation to its current business activities?  Do you have a Remediation Plan that covers any action taken?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please provide information about the conviction including: <ul style="list-style-type: none"> <li>- Details of the circumstances</li> <li>- Whether the company has a remedial plan in place and what actions have been taken for remediation</li> </ul> </li> <li>✓ Please note minor offences can be excluded (such as speeding tickets or parking offences)</li> </ul>	N/A
32 - 34 10394 - 10396	Does your organisation, or any of its Directors or Executive Officers, have any ongoing or pending criminal or civil actions in relation to its current business activities?  Do you have a Remediation Plan that covers any action taken?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please provide information about the conviction including: <ul style="list-style-type: none"> <li>- Details of the circumstances</li> <li>- Whether claims been properly notified in accordance with relevant insurance policy requirements and been accepted by the insurers</li> <li>- Whether the company has a remedial plan and what actions have been taken for remediation</li> </ul> </li> <li>✓ Please note minor offences can be excluded (such as speeding tickets or parking offences)</li> </ul>	N/A
35 - 37 10397 - 10398	Has your organisation, or any of its Directors or Executive Officers, received any enforcement or remedial orders in the last three years that remain unresolved?  Do you have a Remediation Plan that covers any action taken?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please provide information about the conviction including: <ul style="list-style-type: none"> <li>- Details of the circumstances</li> <li>- Whether the company has a remedial plan in place and what actions have been taken for remediation</li> </ul> </li> </ul>	N/A

## BRANCH OFFICE

Ref	Question	Guidance	Info
17	Do you have any Branch offices?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> </ul>	N/A
18	<div> <div> - Branch Office and Contacts Office Name - Website - Telephone Number - Address Line 1 - Address Line 2 - 4 - City - Country - Postcode </div> <div> - Title - Forename - Surname - Position - Telephone Number - Mobile - Email Address </div> </div>	<ul style="list-style-type: none"> <li>✓ Provide all Branch Offices and the related Branch and Enquiry contacts</li> </ul>	Exemption if answered No to REF: 17

## RELATED COMPANIES

Ref	Question	Guidance	Info
331	Do you have any related or associated companies?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> </ul>	N/A
332	<div> <div> - Company name - Address line 1 (Property name/number) - Address line 2 - 4 - Town - Postcode - Country - Telephone - Number - Fax Number - Website </div> <div> - Title - Forename - Surname - Position - Telephone Number - Telephone Number - Mobile Number - Fax Number - Contact email address </div> </div>	<ul style="list-style-type: none"> <li>✓ Provide all Related Companies, contact and relationship details</li> </ul>	Exemption if answered No to REF: 331

## Insurances

Insurance is a critical component of any business, serving as a legal obligation in addition to providing cover for potential mistakes, risks, incidents, injuries, and other unforeseen events for both the business owner and employees.

**So that we can ensure compliance for your business, you must provide evidence of:**

- ✓ Certificates for all type of coverage
- ✓ Insurer and Broker Details
- ✓ Work undertaken by the company
- ✓ Number of directly employed staff

**Different types of insurance are necessary based on the nature of the work being performed and the size of the company. Please refer to the following guidelines:**

- ✓ All companies are required to have Public Liability insurance
- ✓ Companies with directly employed staff must have Employers Liability insurance
- ✓ Consultant companies should have Professional Indemnity Liability insurance

Additionally, companies that select Consultant or Design work categories on their Facilitiesline profile are required to have Professional Indemnity Insurance.

### INSURANCES

Ref	Question	Guidance	Info
25	Please provide details of the insurances your company holds <ul style="list-style-type: none"> <li>- Insurance Type</li> <li>- Insurance Name (the name of your insurance provider)</li> <li>- Policy Number</li> <li>- Limit Of Indemnity</li> <li>- Limit For Single Event</li> <li>- Excess</li> <li>- Expiry Date</li> </ul> Please upload your membership certificate or evidence of membership <ul style="list-style-type: none"> <li>- Business Name of Insurance broker</li> <li>- Telephone Number</li> </ul>	<ul style="list-style-type: none"> <li>✓ Please ensure all Insurance Types are listed separately</li> <li>✓ All information input to each insurance type must match the supporting document</li> <li>✓ Please note, all requested information must be provided, we are unable to accept 'TBC' or anything else in place of a Policy Number</li> <li>✓ All supplier types must provide Employers' Liability Insurance if they have any staff</li> <li>✓ Contractors must provide Public Liability</li> <li>✓ Consultants must provide Professional Indemnity</li> <li>✓ Material Suppliers must provide Product Liability</li> <li>✓ Any Contractors that hold a Design work category are required to also provide Professional Indemnity insurance</li> </ul>	N/A



## Work Categories

Work Categories are the types of trade, service or work your company does. You can select multiple categories; however, you must have at least one Verified Work Category to achieve Bronze.

To verify a Work Category, the Company and Financial Information and Insurance requirements must also be verified. The Company and Financial Information requirement will extract your Turnover figure, which is a key component in the notation value calculation.

Any Consultant or Design Work Categories will require Professional Indemnity insurance to be verified. Higher risk Work Categories will require you to complete additional capability related questions, these are listed against each category.

### TRADES (WORK CATEGORIES)

Ref	Question	Guidance	Info
N/A	Needs Verified Facilitiesline Work Category (What types of trades/ work does your company undertake?)	<ul style="list-style-type: none"> <li>✓ Please select at least one trade, service or work that your company carries out</li> <li>✓ For each trade, service or work your company undertakes, please provide:               <ul style="list-style-type: none"> <li>- A maximum contract value for which you have undertaken work for the above work category in the past two years (Note that this value cannot exceed 75% of your current turnover)</li> <li>- To what extent you would sub-contract this category of work</li> </ul> </li> <li>✓ You may select work categories from these types:               <ul style="list-style-type: none"> <li>- Facilities Management</li> </ul> </li> </ul>	N/A

### ASBESTOS AWARENESS TRAINING

Ref	Question	Guidance	Info
2524 - 2525	Please confirm that all of the operatives undertaking invasive works on client sites have been provided with Asbestos Awareness Training within the last 12 months	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please evidence demonstrating that you have provided Asbestos Awareness Training on an annual basis such as certificates or arrangements for providing training</li> </ul>	N/A

### ASBESTOS SURVEYS

Ref	Question	Guidance	Info
2526	Please provide evidence to show that those carrying out Asbestos Survey work on your behalf are competent to do so	<ul style="list-style-type: none"> <li>✓ Evidence must clearly show experience and qualification of those carrying out asbestos surveys</li> <li>✓ This could include CVs, a statement of work experience AND a recognised and relevant qualification</li> <li>✓ If a P402 is provided, this must be dated within the last 5 years</li> </ul>	N/A
2527	Have you been UKAS accredited to undertake Asbestos Surveys?	<ul style="list-style-type: none"> <li>✓ You must answer Yes</li> </ul>	N/A
2528	Please provide evidence to show that you have been UKAS accredited to undertake Asbestos Surveys.	<ul style="list-style-type: none"> <li>✓ Please provide your UKAS accredited certification to undertake Asbestos Surveys</li> </ul>	N/A
2529 - 2531	Do you ever outsource Asbestos Survey work?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please describe your process for ensuring that you only use competent organisations for outsourced Asbestos Survey work</li> <li>✓ Please also provide evidence of the competence of the organisations you use for outsourced Asbestos Survey work</li> </ul>	



# Work Categories

## ASBESTOS TESTING

Ref	Question	Guidance	Info
2532 - 2533	Have you been UKAS accredited to analyse asbestos samples at permanent laboratory premises?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please evidence to show that you have been UKAS accredited to analyse asbestos samples at permanent laboratory premises</li> </ul>	N/A
2534 - 2535	Have you been UKAS accredited to analyse asbestos samples away from the permanent laboratory?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please evidence to show that you have been UKAS accredited to analyse asbestos samples away from the permanent laboratory</li> <li>✓ The certificate scope must include testing for asbestos fibres</li> </ul>	N/A

## WORKING WITH ASBESTOS

Ref	Question	Guidance	Info
2566 - 2568	Do you hold a HSE licence to work with asbestos?	<ul style="list-style-type: none"> <li>✓ You must answer Yes</li> <li>✓ If yes, please provide:               <ul style="list-style-type: none"> <li>- Your Standard HSE licence</li> <li>- Expiry date of the licence</li> </ul> </li> </ul>	N/A
2569 - 2571	Do you ever outsource licensed asbestos work?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please describe your process for ensuring that you only use competent organisations for outsourced asbestos work</li> <li>✓ Please also provide evidence of the competence of the organisations you use for outsourced asbestos work</li> </ul>	N/A

## ELECTRICAL ASSOCIATION MEMBERSHIP

Ref	Question	Guidance	Info
2536 - 2539	Which Electrical Associations is your company a registered member of?	<ul style="list-style-type: none"> <li>✓ Please select either NICEIC, ECA or Other</li> <li>✓ If NICEIC OR ECA, please provide a copy of your current membership</li> <li>✓ If Other, please provide details of the other Electrical Association your company is a member of</li> </ul>	N/A

## LEGIONELLA CONTROL ASSOCIATION

Ref	Question	Guidance	Info
2540 - 2542	Are you registered under the LCA (Legionella Control Association) code of conduct?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please provide:               <ul style="list-style-type: none"> <li>- Your LCA (Legionella Control Association) certificate of registration</li> <li>- Expiry date of the certificate</li> </ul> </li> </ul>	N/A

## Work Categories

### PAT TESTING

Ref	Question	Guidance	Info
2543	Do your employees ever use work equipment while working on your clients' premises?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ Work equipment refers to any mains powered portable tools used on site</li> </ul>	N/A
2544	Do your employees ever use owned mains powered portable tools (110v and/or 240v) while working on your clients' premises?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> </ul>	N/A
2545	Are your mains powered portable tools PAT tested?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If your mains powered portable tools are more than 12 months old, they MUST be PAT tested</li> </ul>	N/A
2547	Please provide evidence to demonstrate that your mains powered portable tools have been PAT tested.	<ul style="list-style-type: none"> <li>✓ Evidence can be provided in the form of a test certificate or test report, listing the electrical portable equipment tested or copy of a test record clearing demonstrating that mains powered portable tools have been checked within the last 12 months</li> </ul>	N/A

### SECURITY SERVICES

Ref	Question	Guidance	Info
2548 - 2550	Does your company hold any contractor approvals that relate directly to security services?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please:               <ul style="list-style-type: none"> <li>- List the security service approval(s) you hold</li> <li>- Upload a current certificate for each security scheme listed</li> </ul> </li> </ul>	N/A
2551 - 2552	Does your company employ persons who are licensed by the Security Industry Authority?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please upload a current copy of a Security Industry Authority certificate / card for one of your employees</li> </ul>	N/A
2553	Do all your front-line employees hold a Security Industry Authority licence relevant to the work they carry out?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> </ul>	N/A
2554 - 2555	Is your company a member of any industry bodies that are directly related to the security industry?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please list the security industry body or bodies that your company holds memberships with</li> </ul>	N/A
2556 - 2557	Does your company insurance contain any exclusions relating to security work?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please list the exclusions relating to security work that are contained within your company insurance</li> </ul>	N/A

### TM44 INSPECTIONS

Ref	Question	Guidance	Info
2558	Do any of your staff carry out TM44 inspections on client premises?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> </ul>	N/A
2559 - 2560	Do you hold any accreditations for undertaking TM44 inspections?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please evidence of the accreditation you hold for TM44 inspections</li> </ul>	N/A
2561	Please provide evidence to show that your operatives are competent to undertake TM44 inspections.	<ul style="list-style-type: none"> <li>✓ Evidence could include accreditations or qualifications such as Level 3-4 Air Conditioning Energy Assessors qualification</li> </ul>	N/A



## Work Categories

### WORKING WITH ELECTRICITY

Ref	Question	Guidance	Info
2572	Do your employees ever work with electricity (as defined by the Electricity at Work Regulations) while working on your clients' sites?	✓ Please answer Yes or No	N/A
2573	Please provide a copy of your Electrical Isolation Policy.	✓ Your policy should include at a minimum: <ul style="list-style-type: none"> <li>- Details of the person with ultimate responsibility for Health &amp; Safety within the company and details of the person to be contacted in the event of any doubt regarding safety during work on electrical circuits</li> <li>- That only competent people will undertake the work</li> <li>- That work is only done 'dead', or clear guidance on when 'live' working would be permissible</li> </ul>	N/A
2574	Please provide a copy of your Electrical Isolation Procedure.	✓ Your procedure should include at a minimum: <ul style="list-style-type: none"> <li>- Confirmation of who is authorised to carry out the electrical work</li> <li>- The process for switching off/shutting down electrically connected equipment</li> <li>- The steps taken for each type of circuit encountered</li> <li>- Lock-out/Tag-out arrangements (e.g. steps to ensure re-energisation can't take place accidentally)</li> <li>- The re-energisation process</li> </ul> ✓ Please note, we cannot accept copies of HSE or NICEIC guidance	N/A
2575 / 2578	Have you trained your staff on your Electrical Isolation Procedure?	✓ Please answer Yes or No ✓ If yes, please provide evidence that demonstrates you have provided training in your Electrical Isolation Procedure to your staff	N/A
2576 / 2579	Do any of your staff hold recognised electrical certifications, qualifications or competency cards?	✓ You must answer Yes ✓ If yes, please provide evidence of the recognised electrical certifications, qualifications or competency cards held by your staff	N/A
2577 / 2580 - 2581	Have any of your staff achieved certification under the Electrotechnical Certification Scheme and are current registered card holders?	✓ Please answer Yes or No ✓ If yes, please detail how many of your staff are current Electrotechnical card holders and provide examples of valid Electrotechnical cards that your staff hold	N/A

### WORKING WITH GAS

Ref	Question	Guidance	Info
2582	Do your employees ever work with gas while working on your clients' sites?	✓ Please answer Yes or No	N/A
2584 / 2586 - 2587	Does your company possess a current Gas Safe Certificate?	✓ Please answer Yes or No ✓ If yes, please provide: <ul style="list-style-type: none"> <li>- Your Gas Safe certificate</li> <li>- Expiry date of the certificate</li> </ul>	N/A
2583	Do you ever undertake work that may require you to use a sub-contractor to carry out work with gas on your clients' sites?	✓ Please answer Yes or No	N/A
2585	Do you ensure that you only sub-contract relevant gas work to competent, Gas Safe certificated companies and operatives in compliance with the Gas Safety (Installation and Use) Regulations 1998, and always check their current status for every job you sub-contract?	✓ You must answer Yes	N/A



## Work Categories

### WORKING WITH LIQUID FUELS

Ref	Question	Guidance	Info
2588	Do you manufacture, install, or maintain liquid fuel fired heating or cooking systems, or their components?	✓ Please answer Yes or No	N/A
2589 - 2591	Is your Company registered with OFTEC (Oil Firing Technical Association)?	✓ Please answer Yes or No ✓ If yes, please provide: - Your OFTEC certificate which is held by your organisation - An example of an OFTEC certificate which is held by one of your technicians	N/A
2592	Please explain how you ensure your organisation and operatives maintain up to date competence, understanding and compliance with all relevant building regulations and standards in relation to liquid fuel fired heating or cooking systems?	✓ Please detail how you manage competence and compliance, such as using a training matrix	N/A
2593 - 2594	Do you ever purchase equipment or subcontract installation and maintenance of liquid fuel fired heating or cooking systems?	✓ Please answer Yes or No ✓ If yes, please explain how you ensure your suppliers and subcontractors maintain up to date competence, understanding and compliance with all relevant building regulations and standards in relation to liquid fuel fired heating or cooking systems	N/A

### WORKING WITH REFRIGERANT

Ref	Question	Guidance	Info
2595 / 2597 - 2598	Do your employees ever work with Refrigeration and/or Air Conditioning Equipment while working on your clients' sites?	✓ Please answer Yes or No ✓ If yes, please provide: - Your current F-Gas Company certificate - Expiry date of the certificate	N/A
2596	Do you ever undertake work that may require you to use a sub-contractor to carry out work with refrigeration and/or air conditioning equipment on your clients' sites?	✓ Please answer Yes or No	N/A
2599	Do you ensure that you sub-contract work with refrigeration and/or air conditioning equipment to competent, F-Gas registered companies and operatives in compliance with the Fluorinated Greenhouse Gases Regulations 2015, and always check their current status for every job you sub-contract?	✓ You must answer Yes	N/A

### ENFORCEMENT AUTHORITY VISITS

Ref	Question	Guidance	Info
2600 - 2601	Has any Enforcement Authority visited within the last five years?	✓ Please answer Yes or No ✓ If yes, please provide details of visits from an enforcement authority within the last 5 years	N/A

## Work Categories

### HOT WORKS

Ref	Question	Guidance	Info
2602 - 2603	Do you subcontract any work that will be undertaken at your clients' sites or premises?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please confirm if your subcontractors ever undertake 'Hot Works' while working on your clients' premises</li> </ul>	N/A
2604 - 2605	Do your employees ever undertake 'Hot Works' while working on your clients' premises?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please provide a method statement for a client's site which takes into account 'Hot Works'</li> <li>✓ This must lay out the procedures and sequence of operations to be undertaken, to ensure a safe system of work</li> </ul>	N/A
2606	Please provide a statement from your insurance company, confirming that your Public Liability insurance does not exclude 'Hot Works'.	<ul style="list-style-type: none"> <li>✓ Evidence can be either a dated email or letter on headed paper from your insurance / broker. The document must display:               <ul style="list-style-type: none"> <li>- The date</li> <li>- Policy Number</li> <li>- Evidence that Hot Works is covered on client premises</li> <li>- Any other applicable conditions</li> </ul> </li> </ul>	N/A
2607	What date does your Public Liability policy expire?	<ul style="list-style-type: none"> <li>✓ Please provide the date of expiry</li> </ul>	N/A

### WORKING AT HEIGHT

Ref	Question	Guidance	Info
2608 - 2609	Do you subcontract any work that will be undertaken at your clients' sites or premises?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please confirm if your subcontractors ever undertake working at height while working on your clients' premises</li> </ul>	N/A
2610 - 2611	Do your employees ever undertake working at height while working on your clients' premises?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please provide a method statement for a client's site which takes into account working at height</li> <li>✓ This must lay out the procedures and sequence of operations to be undertaken, to ensure a safe system of work</li> </ul>	N/A
2612	Please provide a statement from your insurance company, confirming that your Public Liability insurance does not exclude working at height.	<ul style="list-style-type: none"> <li>✓ Evidence can be either a dated email or letter on headed paper from your insurance / broker. The document must display:               <ul style="list-style-type: none"> <li>- The date</li> <li>- Policy Number</li> <li>- Evidence that working at height is covered on client premises</li> <li>- Any other applicable conditions</li> </ul> </li> </ul>	N/A
2613	What date does your Public Liability policy expire?	<ul style="list-style-type: none"> <li>✓ Please provide the date of expiry</li> </ul>	N/A

# Work Categories

## WORKING IN CONFINED SPACES

Ref	Question	Guidance	Info
2614 - 2615	Do you subcontract any work that will be undertaken at your clients' sites or premises?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please confirm if your subcontractors ever undertake work in confined spaces while working on your clients' premises</li> </ul>	N/A
2616 - 2617	Do your employees ever undertake work in confined spaces while working on your clients' premises?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please provide a method statement for a client's site which takes into account work in confined spaces</li> <li>✓ This must lay out the procedures and sequence of operations to be undertaken, to ensure a safe system of work</li> </ul>	N/A
2618	Please provide a statement from your insurance company, confirming that your Public Liability insurance does not exclude work in confined spaces.	<ul style="list-style-type: none"> <li>✓ Evidence can be either a dated email or letter on headed paper from your insurance / broker. The document must display: <ul style="list-style-type: none"> <li>- The date</li> <li>- Policy Number</li> <li>- Evidence that working at height is covered on client premises</li> <li>- Any other applicable conditions</li> </ul> </li> </ul>	N/A
2619	What date does your Public Liability policy expire?	<ul style="list-style-type: none"> <li>✓ Please provide the date of expiry</li> </ul>	N/A

## HAZARDOUS MATERIALS

Ref	Question	Guidance	Info
2620 / 2643	Do you subcontract any work that will be undertaken at your clients' sites or premises?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please confirm if your subcontractors ever work with Hazardous Materials while working on your clients' premises</li> </ul>	N/A
2621	Do your employees ever work with Hazardous Materials while working on your clients' premises?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> </ul>	N/A
2622 - 2623	Do you document your COSHH Assessments?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please provide a completed example of a COSHH Assessment from the last 12 months</li> </ul>	N/A

## MANUAL HANDLING

Ref	Question	Guidance	Info
2633 / 2637	Do you subcontract any work that will be undertaken at your clients' sites or premises?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please confirm if your subcontractors ever undertake 'Manual Handling' while working on your clients' premises</li> </ul>	N/A
2634	Do your employees ever undertake 'Manual Handling' while working on your clients' premises?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> </ul>	N/A
2635 - 2636	Do you document your Manual Handling Assessments?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please provide a completed example of a Manual Handling Assessment from the last 12 months</li> </ul>	N/A

## Work Categories

### WORK EQUIPMENT

Ref	Question	Guidance	Info
2638 - 2639	Do your employees ever use work equipment while working on your clients' premises?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ Work equipment is any machinery, appliance, apparatus, tool or installation used for work</li> <li>✓ If yes, please list the types of work equipment that your employees use while on your clients' premises (including whether the equipment is owned or hired)</li> </ul>	N/A
2640	Please provide evidence to demonstrate that you have undertaken checks (other than PAT testing) on the work equipment your employees use while on your clients' premises.	<ul style="list-style-type: none"> <li>✓ Please provide evidence via a form, calibration report or an onsite inspection report that covers the following:               <ul style="list-style-type: none"> <li>- <i>Work Equipment Check</i></li> <li>- <i>Ladder Checklist</i></li> <li>- <i>Or a copy of an invoice for repair/ maintenance</i></li> </ul> </li> <li>✓ All evidence provided must be dated within the last 12 months</li> </ul>	N/A
2641	Do you ensure that your employees have been provided with training to ensure they are competent to use their work equipment?	<ul style="list-style-type: none"> <li>✓ Please answer Yes or No</li> <li>✓ If yes, please evidence should be in the form of:               <ul style="list-style-type: none"> <li>- <i>Valid certificates</i></li> <li>- <i>Toolbox talks (including the contents and attendance sheet) clearly showing safe use of work equipment</i></li> <li>- <i>Valid IPAF cards/certificates</i></li> <li>- <i>PASMA etc</i></li> </ul> </li> </ul>	N/A